## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

097237

H-06		CLAIMS AS	S FILED - (Column			mn 2)		MALL EN	1.47		OTHER	
_	TAL CLAIMS		Column		COIU	11111 2)		YPE _		OR	SMALL	
* 1 A S							-	RATE	FEE		RATE	FEE**
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	·710.00 }
TO	TAL CHARGEA	BLE CLAIMS	7 minus 20=		*			X\$ 9=		OR	X\$18=	
il de.	EPENDENT CL		<u> </u>	nus 3 =				X40=		OR	X80=	AN AN
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT	SENT			İ	+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2			ı	TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II								*			OTHER	7
(Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	SMALL	** 1:
AMENDMENT.A.		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	*ADDI-* TIONAL FEE	
	Total	. 16	Minus	**		= ()	-	X\$ 9=		OR	X\$18=	
	Independent	NITATION OF A	Minus	***	T CL AIRA		3	X40=		OR	X80=	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	A
						4		TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2\	(Column 3)	A	ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDEN <sup>-</sup>	Γ CLAIM		J þ	+135=			+270=	
								+135=		OR	+270=	
								DDIT. FEE		OR	ADDIT. FEE	L
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDI	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Ind pendent	*	Minus	***		=		X40=			X80=	
lacksquare	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		<b>]</b>	740-		OR	7,00-	
	film outsits and		ho ontmille - 1	····- 0 ······'	- "O" ! :	turn o		+135=		ÖR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously Pa ber Previously Pa					er fou	nd in the app	oropriate box	x in co	lumn 1.	